



011-41195959

Dear Manipal Hospital

We have received a booking request with the following details. Provide your confirmation by clicking on the Yes button.

You confirm this booking?

Name : MR. YADAV KULDEEP
Contact Details : 9616706293
Hospital Package Name : Mediwheel Full Body Health Checkup Male Below 40
Location : NH-24,Hapur Road,Oppo. Bahmeta Village,Near Lancraft Golf Links Aparment
Appointment Date : 11-04-2024

Member Information		
Booked Member Name	Age	Gender
MR. YADAV KULDEEP	30 year	Male

Tests included in this Package -

- Stool Test
- Thyroid Profile
- ESR
- Blood Glucose (Fasting)
- General Physician Consultation
- TMT OR 2D ECHO
- Blood Group
- Blood Glucose (Post Prandial)
- Chest X-ray
- ECG
- USG Whole Abdomen
- Eye Check-up consultation
- Urine Sugar Fasting
- Urine Sugar PP
- Dental Consultation
- Urine analysis
- CBC
- HbA1c
- Lipid Profile
- Kidney Profile
- Liver profile

Thanks,
Mediwheel Team

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भारत सरकार
Unique Identification Authority of India
Government of India

नामांकन क्रम/Enrolment No.: 1207/00677/13724

To
कुलदीप यादव
Kuldeep Yadav
S/O Paras Nath Yadav
Vill-Bhukhali Post Kohada
foolpur
Azamgarh Uttar Pradesh - 276288
9598734403

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आपका आधार क्रमांक / Your Aadhaar No. :

3760 8540 4872

मेरा आधार, मेरी पहचान



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India



कुलदीप यादव
Kuldeep Yadav
जन्म तिथि/ DOB: 20/08/1993
पुरुष / MALE



3760 8540 4872

मेरा आधार, मेरी पहचान

पता:
S/O पारस नाथ यादव, ग्राम-भुखली
पोस्ट कोहडा, फूलपुर, आजमगढ़,
उत्तर प्रदेश - 276288

Address:
S/O Paras Nath Yadav, Vill-
Bhukhali Post Kohada, foolpur,
Azamgarh,
Uttar Pradesh - 276288

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- सूचना
- आधार पहचान का प्रमाण है, नागरिकता का नहीं।
 - पहचान का प्रमाण ऑनलाइन ऑथेंटिकेशन द्वारा प्राप्त करें।
 - यह एक इलेक्ट्रॉनिक प्रक्रिया द्वारा बना हुआ पत्र है।

INFORMATION

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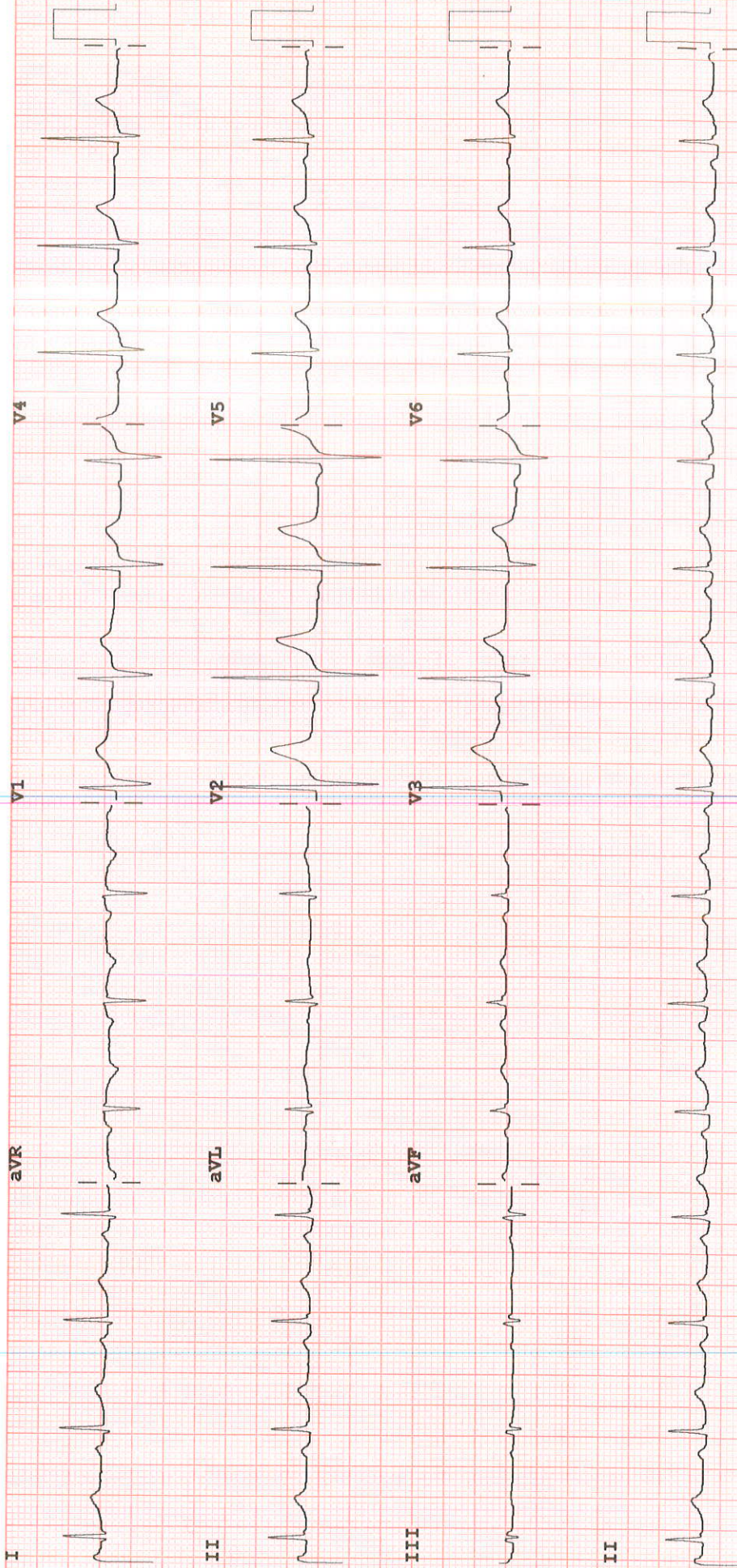
OUTPATIENT RECORD

Hospital No: MH013282080	Visit No: H18000002088	
Name: MR KULDEEP YADAV	Age/Sex: 30 Yrs/Male	
Doctor Name: HEALTH CHECK MGD	Specialty: HC SERVICE MGD	
Date: 11/04/2024 08:34AM		
BP Systolic: 116 mmHg	BP Diastolic: 81 mmHg	Pulse Rate: 81beats per minute
Saturation(Oxygen): 99%	Height: 165cm	Weight : 71.4kg
BMI: 26.23	Pain Score: 00	Fall Risk: 01
Vulnerable: 01		
OPD Notes :		
PRESENT OPHTHALMIC COMPLAINS - HEALTH CHECKUP		
SYSTEMIC/ OPHTHALMIC HISTORY - N/C		
EXAMINATION DETAILS	RIGHT EYE	LEFT EYE
VISION	6/6	6/6
CONJ	NORMAL	NORMAL
CORNEA	CLEAR	CLEAR
LENS	CLEAR	CLEAR
OCULAR MOVEMENTS	FULL	FULL
NCT	16	17
FUNDUS EXAMINATION		
OPTIC DISC	C:D 0.4	C:D 0.4
MACULAR AREA	FOVEAL REFLEX PRESENT	FOVEAL REFLEX PRESENT
ADVISE / TREATMENT		
E/D AQUALINA 4 TIMES DAILY BE		
REVIEW AFTER 6 MTH		

HEALTH CHECK MGD

- OTHERWISE NORMAL ECG -

Unconfirmed Diagnosis



Dev:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 60~ 0.15-100 Hz

PH100B CL:P?



TMT INVESTIGATION REPORT

Patient Name	MR KULEEP YADAV	Location	: Ghaziabad
Age/Sex	: 30Year(s)/male	Visit No	: V0000000001-GHZB
MRN No	MH013282080	Order Date	: 11/04/2024
Ref. Doctor	: HCP	Report Date	: 11/04/2024

Protocol	: Bruce	MPHR	: 190BPM
Duration of exercise	: 8min 27sec	85% of MPHR	: 162BPM
Reason for termination	: THR achieved	Peak HR Achieved	: 169BPM
Blood Pressure (mmHg)	: Baseline BP : 120/80mmHg	% Target HR	: 88%
	Peak BP : 140/90mmHg	METS	: 10.1METS

STAGE	TIME (min)	H.R (bpm)	BP (mmHg)	SYMPTOMS	ECG CHANGES	ARRHYTHMIA
PRE- EXC.	0:00	63	120/80	Nil	No ST changes seen	Nil
STAGE 1	3:00	111	130/80	Nil	No ST changes seen	Nil
STAGE 2	3:00	137	140/90	Nil	No ST changes seen	Nil
STAGE 3	2:27	169	140/90	Nil	No ST changes seen	Nil
RECOVERY	5:17	86	130/80	Nil	No ST changes seen	Nil

COMMENTS:

- No ST changes in base line ECG.
- No ST changes at peak stage.
- No ST changes in recovery.
- Normal chronotropic response.
- Normal blood pressure response.

IMPRESSION:

Treadmill test is **negative** for exercise induced reversible myocardial ischemia.

Dr. Bhupendra Singh
MD, DM (CARDIOLOGY), FACC
Sr. Consultant Cardiology

Dr. Abhishek Singh
MD, DNB (CARDIOLOGY), MNAMS
Sr. Consultant Cardiology

Dr. Sudhanshu Mishra
MD
Cardiology Registrar

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**RADIOLOGY REPORT**

NAME	MR Kuldeep YADAV	STUDY DATE	11/04/2024 9:09AM
AGE / SEX	30 y / M	HOSPITAL NO.	MH013282080
ACCESSION NO.	R7216316	MODALITY	US
REPORTED ON	11/04/2024 10:39AM	REFERRED BY	HEALTH CHECK MGD

**USG ABDOMEN & PELVIS
FINDINGS**

LIVER: appears normal in size (measures 130 mm) and shape but shows diffuse increase in liver echotexture, in keeping with diffuse grade I fatty infiltration. Rest normal.

SPLEEN: Spleen is normal in size (measures 102 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 10 mm.

COMMON BILE DUCT: Appears normal in size and measures 3 mm.

IVC, HEPATIC VEINS: Normal.

BILIARY SYSTEM: Normal.

GALL BLADDER: Gall bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

PANCREAS: Pancreas is normal in size, shape and echotexture. Rest normal.

KIDNEYS: Bilateral kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is maintained. Rest normal.

Right Kidney: measures 91 x 45 mm.

Left Kidney: measures 99 x 46 mm.

PELVI-CALYCEAL SYSTEMS: Compact.

NODES: Not enlarged.

FLUID: Nil significant.

URINARY BLADDER: Urinary bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

PROSTATE: Prostate is normal in size, shape and echotexture. It measures 45 x 29 x 26 mm with volume 17 cc. Rest normal.

SEMINAL VESICLES: Normal.

BOWEL: Visualized bowel loops appear normal.

IMPRESSION

-Diffuse grade I fatty infiltration in liver.

Recommend clinical correlation.



**Dr. Prabhat Prakash Gupta MBBS, DNB, MNAMS
CONSULTANT RADIOLOGIST**

*****End Of Report*****

**RADIOLOGY REPORT**

NAME	MR Kuldeep YADAV	STUDY DATE	11/04/2024 9:53AM
AGE / SEX	30 y / M	HOSPITAL NO.	MH013282080
ACCESSION NO.	R7216315	MODALITY	CR
REPORTED ON	11/04/2024 9:57AM	REFERRED BY	HEALTH CHECK MGD

XR- CHEST PA VIEW**FINDINGS:**

LUNGS: Normal.
TRACHEA: Normal.
CARINA: Normal.
RIGHT AND LEFT MAIN BRONCHI: Normal.
PLEURA: Normal.
HEART: Normal.
RIGHT HEART BORDER: Normal.
LEFT HEART BORDER: Normal.
PULMONARY BAY: Normal.
PULMONARY HILA: Normal.
AORTA: Normal.
THORACIC SPINE: Normal.
OTHER VISUALIZED BONES: Normal.
VISUALIZED SOFT TISSUES: Normal.
DIAPHRAGM: Normal.
VISUALIZED ABDOMEN: Normal.
VISUALIZED NECK: Normal.

IMPRESSION:

No significant abnormality noted.

Recommend clinical correlation.

Dr. Monica Shekhawat MBBS, DNB
CONSULTANT RADIOLOGIST

*****End Of Report*****

**LABORATORY REPORT**

Name : MR KULDEEP YADAV Age : 30 Yr(s) Sex : Male
Registration No : MH013282080 Lab No : 202404001672
Patient Episode : H18000002088 Collection Date : 11 Apr 2024 08:47
Referred By : HEALTH CHECK MGD Reporting Date : 11 Apr 2024 14:02
Receiving Date : 11 Apr 2024 08:47

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
THYROID PROFILE, Serum			Specimen Type : Serum
T3 - Triiodothyronine (ELFA)	1.090	ng/ml	[0.610-1.630]
T4 - Thyroxine (ELFA)	6.320	ug/ dl	[4.680-9.360]
Thyroid Stimulating Hormone	2.930	µIU/mL	[0.250-5.000]

NOTE:

TSH stimulates the thyroid gland to produce the main thyroid hormones T3 and T4. In cases of hyperthyroidism TSH level is severely inhibited and may even be undetectable. In rare forms of high-origin hyperthyroidism, the TSH level is not reduced, since the negative-feedback control of the thyroid hormones has no effect.

In cases of primary hypothyroidism, TSH levels are always much higher than normal and thyroid hormone levels are low.

The TSH assay aids in diagnosing thyroid or hypophysial disorders.

The T4 assay aids in assessing thyroid function, which is characterized by a decrease in thyroxine levels in patients with hypothyroidism and an increase in patients with hyperthyroidism.

The test has been carried out in Fully Automated Immunoassay System VIDAS using ELFA (Enzyme Linked Fluorescence Assay) technology.

**LABORATORY REPORT**

Name : MR KULDEEP YADAV Age : 30 Yr(s) Sex :Male
Registration No : MH013282080 Lab No : 202404001672
Patient Episode : H18000002088 Collection Date : 11 Apr 2024 08:47
Referred By : HEALTH CHECK MGD Reporting Date : 11 Apr 2024 16:18
Receiving Date : 11 Apr 2024 08:47

BLOOD BANK

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Blood Group & Rh Typing (Agglutination by gel/tube technique)			Specimen-Blood
Blood Group & Rh typing	B Rh(D) Positive		

Technical note:

ABO grouping and Rh typing is done by cell and serum grouping by microplate / gel technique.

Page 2 of 2

NOTE:

- Abnormal Values

-----END OF REPORT-----

Dr. Charu Agarwal
Consultant Pathologist



LABORATORY REPORT

Name : MR KULDEEP YADAV
Registration No : MH013282080
Patient Episode : H18000002088
Referred By : HEALTH CHECK MGD
Receiving Date : 11 Apr 2024 08:47

Age : 30 Yr(s) Sex :Male
Lab No : 202404001672
Collection Date : 11 Apr 2024 08:47
Reporting Date : 11 Apr 2024 13:00

HAEMATOLOGY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
COMPLETE BLOOD COUNT (AUTOMATED)		SPECIMEN-EDTA Whole Blood	
RBC COUNT (IMPEDEANCE)	3.88 #	millions/cumm	[4.50-5.50]
HEMOGLOBIN	13.5	g/dl	[13.0-17.0]
Method:cyanide free SLS-colorimetry			
HEMATOCRIT (CALCULATED)	40.5	%	[40.0-50.0]
MCV (DERIVED)	104.4 #	fL	[83.0-101.0]
MCH (CALCULATED)	34.8 #	pg	[25.0-32.0]
MCHC (CALCULATED)	33.3	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	15.0 #	%	[11.6-14.0]
Platelet count	150	x 10 ³ cells/cumm	[150-410]
Method: Electrical Impedance			
WBC COUNT(TC) (IMPEDEANCE)	4.92	x 10 ³ cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	47.0	%	[40.0-80.0]
Lymphocytes	43.0 #	%	[20.0-40.0]
Monocytes	7.0	%	[2.0-10.0]
Eosinophils	3.0	%	[1.0-6.0]
Basophils	0.0	%	[0.0-2.0]
ESR	25.0 #	mm/1sthour	[0.0-



LABORATORY REPORT

Name : MR KULDEEP YADAV
Registration No : MH013282080
Patient Episode : H18000002088
Referred By : HEALTH CHECK MGD
Receiving Date : 11 Apr 2024 08:47

Age : 30 Yr(s) Sex :Male
Lab No : 202404001672
Collection Date : 11 Apr 2024 08:47
Reporting Date : 11 Apr 2024 16:33

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Glycosylated Hemoglobin			
Specimen: EDTA			
HbA1c (Glycosylated Hemoglobin)	5.4	%	[0.0-5.6]
Method: HPLC			
As per American Diabetes Association (ADA)			
HbA1c in %			
Non diabetic adults >= 18years <5.7			
Prediabetes (At Risk) 5.7-6.4			
Diagnosing Diabetes >= 6.5			
Estimated Average Glucose (eAG)	108	mg/dl	

Comments : HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long term glycemic control.

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

MACROSCOPIC DESCRIPTION

Colour	PALE YELLOW	(Pale Yellow - Yellow)
Appearance	CLEAR	
Reaction[pH]	7.0	(4.6-8.0)
Specific Gravity	1.005	(1.003-1.035)

CHEMICAL EXAMINATION

Protein/Albumin	Negative	(NEGATIVE)
Glucose	NIL	(NIL)
Ketone Bodies	Negative	(NEGATIVE)
Urobilinogen	Normal	(NORMAL)



LABORATORY REPORT

Name	: MR KULDEEP YADAV	Age	: 30 Yr(s) Sex :Male
Registration No	: MH013282080	Lab No	: 202404001672
Patient Episode	: H18000002088	Collection Date	: 11 Apr 2024 09:44
Referred By	: HEALTH CHECK MGD	Reporting Date	: 11 Apr 2024 13:04
Receiving Date	: 11 Apr 2024 09:44		

CLINICAL PATHOLOGY

MICROSCOPIC EXAMINATION (Automated/Manual)

Pus Cells	2-3/hpf	(0-5/hpf)
RBC	0-1/hpf	(0-2/hpf)
Epithelial Cells	NIL	/hpf
CASTS	NIL	
Crystals	NIL	
Bacteria	NIL	
OTHERS	NIL	

Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL	160	mg/dl	[<200]
Method:Oxidase,esterase, peroxide			Moderate risk:200-239
TRIGLYCERIDES (GPO/POD)	189 #	mg/dl	[<150]
			Borderline high:151-199
			High: 200 - 499
			Very high:>500
HDL- CHOLESTEROL	42	mg/dl	[35-65]
Method : Enzymatic Immunoimhibition			
VLDL- CHOLESTEROL (Calculated)	38 #	mg/dl	[0-35]
CHOLESTEROL, LDL, CALCULATED	80.0	mg/dl	[<120.0]
			Near/
Above optimal-100-129			Borderline High:130-159
			High Risk:160-189
T.Chol/HDL.Chol ratio(Calculated)	3.8		<4.0 Optimal
			4.0-5.0 Borderline
			>6 High Risk
LDL.CHOL/HDL.CHOL Ratio(Calculated)	1.9		<3 Optimal
			3-4 Borderline
			>6 High Risk



LABORATORY REPORT

Name : MR KULDEEP YADAV
 Registration No : MH013282080
 Patient Episode : H1800002088
 Referred By : HEALTH CHECK MGD
 Receiving Date : 11 Apr 2024 08:47

Age : 30 Yr(s) Sex :Male
 Lab No : 202404001672
 Collection Date : 11 Apr 2024 08:47
 Reporting Date : 11 Apr 2024 09:41

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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Note:

Reference ranges based on ATP III Classifications.

Lipid profile is a panel of blood tests that serves as initial broad medical screening tool for abnormalities in lipids, the results of this tests can identify certain genetic diseases and determine approximate risks for cardiovascular disease, certain forms of pancreatitis and other diseases

KIDNEY PROFILE

Specimen: Serum

UREA	20.5	mg/dl	[15.0-40.0]
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Method: GLDH, Kinatic assay

BUN, BLOOD UREA NITROGEN	9.6	mg/dl	[8.0-20.0]
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Method: Calculated

CREATININE, SERUM	0.88	mg/dl	[0.70-1.20]
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Method: Jaffe rate-IDMS Standardization

URIC ACID	7.5	mg/dl	[4.0-8.5]
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Method:uricase PAP

SODIUM, SERUM	136.40	mmol/L	[136.00-144.00]
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POTASSIUM, SERUM	4.86	mmol/L	[3.60-5.10]
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SERUM CHLORIDE	101.8	mmol/L	[101.0-111.0]
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Method: ISE Indirect

eGFR (calculated)	115.3	ml/min/1.73sq.m	[>60.0]
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Technical Note

eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to 1.73 sq.m BSA and is not applicable to individuals below 18 years. eGFR tends to be less accurate when Serum Creatinine estimation is indeterminate e.g. patients at extremes of muscle mass, on unusual diets etc. and samples with severe Hemolysis Icterus / Lipemia.

**LABORATORY REPORT**

Name : MR KULDEEP YADAV
Registration No : MH013282080
Patient Episode : H18000002088
Referred By : HEALTH CHECK MGD
Receiving Date : 11 Apr 2024 08:47

Age : 30 Yr(s) Sex : Male
Lab No : 202404001672
Collection Date : 11 Apr 2024 08:47
Reporting Date : 11 Apr 2024 09:41

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
LIVER FUNCTION TEST			
BILIRUBIN - TOTAL Method: D P D	0.86	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT Method: DPD	0.14	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) Method: Calculation	0.72	mg/dl	[0.10-0.90]
TOTAL PROTEINS (SERUM) Method: BIURET	7.40	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) Method: BCG	4.56	g/dl	[3.50-5.20]
GLOBULINS (SERUM) Method: Calculation	2.80	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO Method: Calculation	1.61		[1.00-2.50]
AST (SGOT) (SERUM) Method: IFCC W/O P5P	30.00	U/L	[0.00-40.00]
ALT (SGPT) (SERUM) Method: IFCC W/O P5P	42.30	U/L	[17.00-63.00]
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	93.0 #	IU/L	[32.0-91.0]
GGT	19.0	U/L	[7.0-50.0]



LABORATORY REPORT

Name : MR KULDEEP YADAV
Registration No : MH013282080
Patient Episode : H18000002088
Referred By : HEALTH CHECK MGD
Receiving Date : 11 Apr 2024 08:47

Age : 30 Yr(s) Sex :Male
Lab No : 202404001672
Collection Date : 11 Apr 2024 08:47
Reporting Date : 11 Apr 2024 09:41

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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Liver function test aids in diagnosis of various pre hepatic, hepatic and post hepatic causes of dysfunction like hemolytic anemia's, viral and alcoholic hepatitis and cholestasis of obstructive causes.

The test encompasses hepatic excretory, synthetic function and also hepatic parenchymal cell damage. LFT helps in evaluating severity, monitoring therapy and assessing prognosis of liver disease and dysfunction.

-----END OF REPORT-----

Dr. Charu Agarwal
Consultant Pathologist



LABORATORY REPORT

Name	: MR KULDEEP YADAV	Age	: 30 Yr(s) Sex :Male
Registration No	: MH013282080	Lab No	: 202404001673
Patient Episode	: H18000002088	Collection Date	: 11 Apr 2024 08:47
Referred By	: HEALTH CHECK MGD	Reporting Date	: 11 Apr 2024 09:41
Receiving Date	: 11 Apr 2024 08:47		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
GLUCOSE-Fasting Specimen: Plasma			
GLUCOSE, FASTING (F)	101.0	mg/dl	[70.0-110.0]
Method: Hexokinase			

Normally, the glucose concentration in extracellular fluid is closely regulated so that a source of energy is readily available to tissues and so that no glucose is excreted in the urine.

Increased in Diabetes mellitus, Cushing's syndrome (10-15%), chronic pancreatitis (30%).
Drugs corticosteroids, phenytoin, estrogen, thiazides

Decreased in Pancreatic islet cell disease with increased insulin, insulinoma, adrenocortical insufficiency, hypopituitarism, diffuse liver disease, malignancy(adrenocortical, stomach, fibro sarcoma), infant of a diabetic mother enzyme deficiency diseases(e.g.galactosemia),
Drugs-

insulin, ethanol, propranolol, sulfonylureas, tobutamide, and other oral hypoglycemic agents.

-----END OF REPORT-----

Dr. Charu Agarwal
Consultant Pathologist

**LABORATORY REPORT**

Name	: MR KULDEEP YADAV	Age	: 30 Yr(s) Sex :Male
Registration No	: MH013282080	Lab No	: 202404001674
Patient Episode	: H18000002088	Collection Date	: 11 Apr 2024 13:01
Referred By	: HEALTH CHECK MGD	Reporting Date	: 11 Apr 2024 15:35
Receiving Date	: 11 Apr 2024 13:01		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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PLASMA GLUCOSE

Specimen: Plasma

GLUCOSE, POST PRANDIAL (PP), 2 HOURS 123.0 mg/dl [80.0-140.0]

Method: Hexokinase

Note:

Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying, brisk glucose absorption, post exercise

Page 8 of 8

-----END OF REPORT-----

Dr. Alka Dixit Vats
Consultant Pathologist